12-01-05 Express Mail Mailing Label No. EV 688844204 US 09/841,325 Application Serial Number April 24, 2001 Filing Date First Named Inventor Modell Group Art Unit 3737 RANSMITTAL **Examiner Name** Smith, Ruth S. **FORM** MDS-009CN Attorney Docket No. Patent No. Not applicable Issue Date Not applicable ENCLOSURES (check all that apply) Copy of Notice to File Missing Notice of Appeal to Board Fee Transmittal Form of Patent Appeals and Interferences Parts of Application Appeal Brief (in triplicate) Copy of Fee Formal Drawing(s) Transmittal Form Request For Continued Status Inquiry \boxtimes Amendment/Response Examination (RCE) Transmittal Preliminary Ø Return Receipt Postcard After Final Affidavits/declaration(s) Power of Attorney Certificate of First Class Mailing (Revocation of Prior Powers) П Letter to Official under 37 C.F.R. 1.8 Draftsperson including Drawings Terminal Disclaimer Certificate of Facsimile [Total Sheets ____] Transmission under 37 C.F.R. 1.8 Additional Enclosure(s) П Petition for Extension of Executed Declaration and Power (please identify below) of Attorney for Utility or Design Time Patent Application Ø Ninth Supplemental Small Entity Statement Information Disclosure Statement (3 pgs.) Supplemental Form X PTO-1449 (1 pg.) Copies of SIDS Citations CD(s) for large table or computer (C113-C114) program Certified Copy of Priority Amendment After Allowance Document(s) Request for Certificate of Sequence Listing submission Correction Paper Copy/CD Certificate of Correction (in Computer Readable Copy duplicate) Statement verifying identity of above SIGNATURE BLOCK CORRESPONDENCE ADDRESS

Direct all correspondence to: Patent Administrator
Goodwin Procter LLP
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Date: December 1, 2005

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Reg. No.: 53,002 Tel. No.: (617) 570-1013 Fax No.: (617) 523-1231 William R. Haulbrook, Ph.D. Attorney for the Applicants Goodwin Procter LLP Exchange Place Boston, MA 02109 Express Mail Mailing Label No. EV 688844204 US

DEC 0 1 2005 FY 2005

Complete if Known					
Application Serial Number	09/841,325				
Filing Date	April 24, 2001				
First Named Inventor	Modell				
Group Art Unit	3737				
Examiner Name	Smith, Ruth S.				
Attorney Docket No.	MDS-009CN				

METHOD OF PAYMENT		FEE CALCULATION (continued)				
Payment Enclosed:		3. ADDITIONAL FEES				
		Large Entity	Small Entity			
The Commissioner is hereby authorized to credit		Fee	Entity Fee	Fee Descriptions	Fee Paid	
or charge any fee indicated below for this submission		(\$)	(\$)			
to Deposit Account No. 07-1700.) ` ′	, ,	•		
Required Fees (copy of this sheet en	closed).	130	65	Surcharge - late filing fee or oath		
Additional fee required under 37 CFR 1.16 and		50	25	Surcharge - late provisional filing fee or		
1.17.		İ		cover sheet		
Overpayment Credit.		130	130	Non-English specification		
3. Applicant claims small entity status.		2,520	2,520	Request for ex parte reexamination	<u> </u>	
FEE CALCULATION			60	Extension for reply within first month		
1. FILING/SEARCH/EXAM/SIZE FEES		450	225	Extension for reply within second month		
Large Entity		1020	510	Extension for reply within third month		
Fee (S) Fee Description	Fee Paid	1590	795	Extension for reply within fourth month		
300 Utility filing fee		2160 500	1080 250	Extension for reply within fifth month Notice of Appeal	-	
500 Utility fining fee		500	250 250	Filing a brief in support of an appeal	-	
200 Utility exam fee		1000	500	Request for oral hearing		
250 Utility size fee (each add'l 50 pgs. over 100)		400	400	Petitions to the Commissioner (Gp. I)		
200 Design filing fee		200	200	Petitions to the Commissioner (Gp. II)		
100 Design search fee		130	130	Petitions to the Commissioner (Gp. III)		
130 Design exam fee		180	180	Submission of Supplemental Information	100.00	
Design size fee (each add'l 50 pgs. over 100)		700	395	Disclosure Statement	180.00	
		790	373	Filing a submission after final rejection (37 CFR 1.129(a))		
Number Number Rate	Amount	790	395	For each additional invention to be		
Filed Extra		',	-70	examined (37 CFR 1.129(b))		
Total Claims $-20 = x \$ 50.00 =$		100	100	Certificate of Correction for		
				applicant's error		
Independent		130	65 S===:E-)	Submission of Terminal Disclaimer		
Claims $-3 = x $200.00 =$	i	Other fee (
☐ Multiple Dependent Claim(s), if any \$360.00 =		Culei lee (ореспу)			
TOTAL:						
. SMALL ENTITY DISCOUNT:		1				
SUBTOTAL (1) (\$)	0.00	1				
2. AMENDMENT CLAIM FEES	D D-11			OLIMPOTATION (A)	100.00	
Claims Highest No. Present Rate Remaining Previously Extra	Fee Paid			SUBTOTAL (3) (\$	5) 180.00	
After Amend. Paid For	,					
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Indep = $x 200.00 First Presentation of Multiple Dep. + \$360.00		1		SUBTOTAL (2) SUBTOTAL (3)		
☐ First Presentation of Multiple Dep. + \$360.00 Claim	,—			SUBTOTAL (3)	100.00	
	(\$)				<u> </u>	
	<u>(\$)</u>					
SUBTOTAL (2)	(\$) 0.00			TOTAL (\$)	180.00	
CORRESPONDENCE ADDRESS			SIGNATURE BLOCK			
Direct all correspondence to:				Respectfully submitted,		
Patent Administrator					11	
Goodwin Procter LLP			Date: December 1, 2005 William Med			
Exchange Place			Date: December 1, 2005 Reg. No.: 53,002 William R. Haulbrook, Ph.D.			
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